CH \$65.00 5259494

TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1 Stylesheet Version v1.2 ETAS ID: TM785406

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	ENTITY CONVERSION

CONVEYING PARTY DATA

Name	Formerly	Execution Date	Entity Type		
Chemex Global, Inc.		06/30/2022	Corporation: TEXAS		

RECEIVING PARTY DATA

Name:	Chemex Global, LLC
Street Address:	19450 SH 249 Suite 450
City:	Houston
State/Country:	TEXAS
Postal Code:	77070
Entity Type:	Limited Liability Company: TEXAS

PROPERTY NUMBERS Total: 2

Property Type	Number	Word Mark
Registration Number:	5259494	
Registration Number:	5254652	CHEMEX MODULAR

CORRESPONDENCE DATA

Fax Number:

Correspondence will be sent to the e-mail address first; if that is unsuccessful, it will be sent using a fax number, if provided; if that is unsuccessful, it will be sent via US Mail.

Phone: 7137581105

Email: iptldocket@velaw.com

Correspondent Name: W. Scott Brown

Address Line 1: 845 Texas Avenue, Suite 4700

Address Line 4: Houston, TEXAS 77002

NAME OF SUBMITTER:	W. Scott Brown
SIGNATURE:	/wsb/
DATE SIGNED:	02/08/2023

Total Attachments: 7

source=Chemex Global, LLC-TX-Cert Copy of Restated Articles#page1.tif source=Chemex Global, LLC-TX-Cert Copy of Restated Articles#page2.tif source=Chemex Global, LLC-TX-Cert Copy of Restated Articles#page3.tif source=Chemex Global, LLC-TX-Cert Copy of Restated Articles#page4.tif source=Chemex Global, LLC-TX-Cert Copy of Restated Articles#page5.tif

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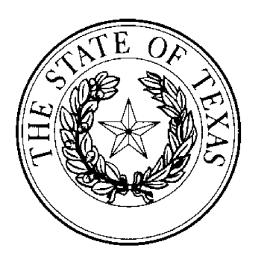
Office of the Secretary of State

The undersigned, as Deputy Secretary of State of Texas, does hereby certify that the attached is a true and correct copy of each document on file in this office as described below:

> Chemex Global, LLC Filing Number: 804644881

Certificate of Conversion June 30, 2022

> In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on January 12, 2023.



Jose A. Esparza Deputy Secretary of State

REEL: 007963 FRAME: 0593

Phone: (512) 463-5555 Prepared by: SOS-WEB Form 632 (Revised 05/11)

Return in duplicate to: Secretary of State P.O. Box 13697 Austin, TX 78711-3697 512 463-5555 FAX: 512 463-5709

Filing Fee: See instructions

This space reserved for office use.



Certificate of Conversion of a **Corporation Converting** to a

Limited Liability Company

Converting Entity Information						
The name of the converting corpor Chemex Global, Inc.	ation is:					
The jurisdiction of formation of the	e corporation is: <u>Texas</u>					
The date of formation of the corpo	-					
The file number, if any, issued to t	he corporation by the secreta	ry of state, is: 8	300481840			
Plan o	f Conversion—Alternative	Statements				
The corporation named above is colliability company is:	onverting to a limited liability	company. The n	ame of the limited			
Chemex Global, LLC						
The limited liability company will	be formed under the laws of	Texas				
☐ The plan of conversion is attac	hed.					
If the plan of conver Instead of attaching the plan of	sion is not attached, the following sta f conversion, the corporation	_				
A signed plan of conversion is on to converting entity. The address of t			<u>.</u>			
19450 SH 249 Suite 450	Houston	Texas	USA 77070			
Street or Mailing Address	City	State	Country Zip Code			
A signed plan of conversion will be the limited liability company, the c the limited liability company is:						
19450 SH 249 Suite 450	Houston	Texas	USA 77070			
Street or Mailing Address	City	State	Country Zin Code			

A copy of the plan of conversion will be furnished on written request without cost by the converting entity before the conversion or by the converted entity after the conversion to any owner or member of the converting or converted entity.

Form 632 4

 $And rew\,M.\,Cannon, Treasurer\, and\, Chief Financial\, Officer$

Form 632 5

Form 205 (Revised 12/21)

Submit in duplicate to: Secretary of State P.O. Box 13697 Austin, TX 78711-3697 512 463-5555

Filing Fee: \$300

Certificate of Formation Limited Liability Company

This space reserved for office use.

Article 1 - Entity Name and Type

	Th	ie f	il	ling ent	tity	being :	formed	is a	limited	i lia	bilii	ty company.	The name of	ť 1	the	entit	y:	is:
--	----	------	----	----------	------	---------	--------	------	---------	-------	-------	-------------	-------------	-----	-----	-------	----	-----

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Chemex	Global	. LLC

The name must contain the words "limited liability company," "limited company," or an abbreviation of one of these phrases.

Article 2 - Registered Agent and Registered Office

(See instructions. Select and complete either A or B and complete C.)

✓ A. The initial registered agent		ation (cannot be entity	• ,	name of:
Capitol Corporate Services, Inc.				
OR B. The initial registered agent:	is an individu	al resident of the	state whose name	is set forth below:
First Name	M.I.	Last Name		Suffix
C. The business address of the reg	istered agent	and the registered	office address is:	
1501 S. MoPac Expy., Ste.220		Austin	TX	78746
Street Address	City		State	Zip Code

Article 3—Governing Authority

(Select and complete either A or B and provide the name and address of each initial governing person.)

\checkmark	A.	The	limited	liability	company	initially	has	managers.	The	name	and	address	of	each	initial
ma	nage	er are	set for	th below	•										

B. The limited liability company does not initially have managers. The name and address of each initial member are set forth below.

NAME (Enter the name of either an individual	or an organization, bu	t not both.)			
if individual Michael	P.	Childers			
First Name OR IF ORGANIZATION	M.I.	Last Name			Suffix
Organization Name ADDRESS					
19450 SH 249 Suite 450	Suite 450 Houston			USA	77070
Street or Mailing Address	C	`ity	State	Country	Zip Code

Form 205 1

INITIAL GOVERNING PERSON	2						
NAME (Enter the name of either an individua IF INDIVIDUAL		both.)					
First Name	M.I.	Last Name			Suffix		
OR					<i></i>		
IF ORGANIZATION							
Organization Name ADDRESS							
Street or Mailing Address	City		State	Country	Zip Code		
INITIAL GOVERNING PERSON	3						
NAME (Enter the name of either an individua IF INDIVIDUAL		both.)					
First Name	M.I.	Last Name			Suffix		
OR IF ORGANIZATION					<i>5-</i>		
Organization Name ADDRESS							
Street or Mailing Address	City		State	Country	Zip Code		
Article 4 – Purpose The purpose for which the company is formed is for the transaction of any and all lawful purposes for which a limited liability company may be organized under the Texas Business Organizations Code.							
Initial Mailing Address (Provide the mailing address to which state franchise tax correspondence should be sent.)							
19450 SH 249 Suite 450	Houston		Texas	77070	USA		
Mailing Address	City		State	Zip Code	Country		
Supplemental Provisions/Information							
Text Area: [The attached addendum, if any	y, is incorporated herein	by reference.]					
This Certificate of Formation The name of the converting converting of the with an address of 19450 SH	orporation is: Chemo	ex Global, Inc., for					

Form 205 2

Organizer

The name and address of the organizer:						
Andrew M. Cannon						
Name						
19450 SH 249 Suite 450	Houston	TX 77070				
Street or Mailing Address	City	State Zip Code				
Effectiveness of Filing (Select either A, B, or C.)						
A. This document becomes effective whe	n the document is filed b	y the secretary of state.				
B. This document becomes effective at a	later date, or a later date	and time, not more than 90 days				
from the date of signing. The later effective of	date, or date and time is:					
C. This document takes effect upon the occurrence of the future event or fact, other than the						
passage of time. The 90th day after the date of	of signing is:					
The following event or fact will cause the document to take effect in the manner described below:						
Execution						
The undersigned affirms that the person designated as registered agent has consented to the appointment. The undersigned also affirms that, to the best knowledge of the undersigned, the name provided as the name of the filing entity does not falsely imply an affiliation with a governmental entity. The undersigned signs this document subject to the penalties imposed by law for the submission of a materially false or fraudulent instrument and certifies under penalty of perjury that the undersigned is authorized to execute the filing instrument.						
Date: June 30, 2022						
	Signature of organizer					
	Andrew M. Cannon					
	Printed or typed name of orga	nizer				

Form 205 3

Form 401-A (Revised 12/09)



Acceptance of Appointment Consent to Serve as Registered Agent §5.201(b) Business Organizations Code

The following form may be used when the person designated as registered agent in a registered agent filing is an individual.

Acceptance of Appointment and Consent to Serve as Registered Agent

I acknowledge, accept and consent to my designation or appointment as registered agent in Texas for

Name of represented entity

I am a resident of the state and understand that it will be my responsibility to receive any process, notice, or demand that is served on me as the registered agent of the represented entity; to forward such to the represented entity; and to immediately notify the represented entity and submit a statement of resignation to the Secretary of State if I resign.

X:

Signature of registered agent

Printed name of registered agent

Date (mm/dd/yyyy)

The following form may be used when the person designated as registered agent in a registered agent filing is an organization.

Acceptance of Appointment and Consent to Serve as Registered Agent

I am authorized to act on behalf of Capitol Corporate Services, Inc.

Name of organization designated as registered agent

The organization is registered or otherwise authorized to do business in Texas. The organization acknowledges, accepts and consents to its appointment or designation as registered agent in Texas for:

Chemex Global, LLC

Name of represented entity

The organization takes responsibility to receive any process, notice, or demand that is served on the organization as the registered agent of the represented entity; to forward such to the represented entity; and to immediately notify the represented entity and submit a statement of resignation to the Secretary of State if the organization resigns.

Krista Abair, Asst. Secretary on behalf

of Capitol Corporate Services, Inc.

06/30/2022

Signature of person authorized to act on behalf of organization

Printed name of authorized person

Date (mm/dd/yyyy)

Form 401-A

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